

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09782791	FILING DATE 09/13/01					
							APPLICANT(S)						
							8/12/04						
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2							52						
3							53						
4							54						
5							55	1					
6							56						
7							57						
8							58						
9							59						
10							60						
11							61						
12							62						
13							63	1					
14							64						
15							65						
16	1						66						
17							67						
18							68						
19							69						
20							70	1					
21							71						
22							72						
23							73						
24							74						
25							75						
26							76						
27							77						
28							78						
29							79						
30	1						80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45	1						95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	6						TOTAL IND.	0					
TOTAL DEP.	64						TOTAL DEP.	04					
TOTAL CLAIMS	70						TOTAL CLAIMS	104					

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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